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<b>Effective on 12/08/2004.</b> Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <b>FEE TRANSMITTAL</b> <b>For FY 2008</b>		<b>Complete if Known</b>	
		Application Number	10/538,749-Conf. #5092
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	June 14, 2005
TOTAL AMOUNT OF PAYMENT (\$)		First Named Inventor	Alessandro Scardovi
		Examiner Name	J. D. Stephens
		Art Unit	2853
		Attorney Docket No.	39994-252860

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: 22-0261
	Deposit Account Name: Venable LLP
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

<b>FEE CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>		
		<b>Small Entity</b>		<b>Small Entity</b>		<b>Small Entity</b>	
<b>Application Type</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fees Paid (\$)</b>
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	
<b>2. EXCESS CLAIM FEES</b>							
						<b>Small Entity</b>	
<b>Fee Description</b>						<b>Fee (\$)</b>	<b>Fee (\$)</b>
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						210	105
Multiple dependent claims						370	185
<b>Total Claims</b>		<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>		
- 20 =		x	=		<b>Fee (\$)</b>		<b>Fee Paid (\$)</b>
HP = highest number of total claims paid for, if greater than 20.							
<b>Indep. Claims</b>		<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>			
- 3 =		x	=				
HP = highest number of independent claims paid for, if greater than 3.							
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>		<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>		
- 100 =	/50 =	(round up to a whole number) x		=			
<b>4. OTHER FEE(S)</b>							
Non-English Specification, \$130 fee (no small entity discount)						<b>Fees Paid (\$)</b>	
Other (e.g., late filing surcharge): Issue Fee (\$1440) Publication Fee (\$300)						\$1740.00	

<b>SUBMITTED BY</b>			
Signature	<i>Steven J. Schwarz</i>	Registration No. (Attorney/Agent)	47,070
Name (Print/Type)	Steven J. Schwarz	Telephone	(202) 344-4295
		Date	March 3, 2008



Docket No: 39994-252860  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of  
Alessandro Scardovi et al.

Art Unit: 2853

Application No: 10/538,749

Examiner: Stephens, Juanita Dionne

Confirmation No: 5092

Filed: June 14, 2005

Atty. Docket No: 39994-252860

For: INTEGRATED PRINthead WITH  
ENCODING CIRCUIT

Customer No:

**26694**

PATENT TRADEMARK OFFICE

**SUBMISSION OF FORMAL DRAWING SHEET**

Mail Stop Issue Fee  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Submitted herewith is one (1) sheet of formal drawings, containing FIGS. 1 and 2,  
incorporating the changes made by the Examiner's Amendment dated December 3, 2007.

Dated: March 3, 2008

Respectfully submitted,

By Steven J. Schwarz  
Robert Kinberg

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Attorney/Agent For Applicant



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**REQUEST FOR ACKNOWLEDGEMENT OF POWER OF ATTORNEY, AND CHANGE  
OF CORRESPONDENCE ADDRESS AND DOCKET NUMBER**

Mail Stop Issue Fee  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

The Applicant respectfully requests that the U.S. Patent and Trademark Office acknowledge the Power of Attorney granted to all practitioners at Customer No. 26694 in the Supplemental Declaration (page 3) submitted on August 18, 2006. The Applicant also requests that the U.S. Patent and Trademark Office update the Correspondence Address for this application to reflect the address associated with Customer No. 26694, and change the Attorney Docket No. to 39994-252860.

Dated: March 3, 2008

Respectfully submitted,

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